

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/52896

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	7					
2		1				
3		2				
4		1				
5		1				
6		1				
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49						
50						
TOTAL IND.	1		5			
TOTAL DEP.	4		4		4	
TOTAL CLAIMS	7		9		9	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.			5			
TOTAL DEP.			4		4	
TOTAL CLAIMS			9		9	